

ARTICLE 6

SECTION 3

INSTITUTION FOR MENTAL DISEASES (IMD)

1. DEFINITION

An IMD is defined as a hospital, nursing facility, or other institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment, or care of persons with mental diseases. Whether an institution is an IMD is determined by whether it functions primarily as a facility established and maintained for the care and treatment of individuals with mental diseases; it does not have to be licensed as such. An institution for the mentally retarded is not an IMD.

A. IMD Exclusion

Individuals between 21 and 65 years of age in IMDs can receive Medi-Cal if otherwise eligible. However, there is no federal financial participation for these individuals.

1) Services provided to individuals 21 to 65 years of age in an IMD include the following:

- Facility charges (the daily bed rate),
- Medi-Cal covered physician services,
- Prescription drugs,
- Laboratory services,
- X-ray services,
- Dental services,
- Vision services,
- Psychiatrist services, and
- Psychologist services.

B. Disability Determination

ETs shall determine the Medi-Cal eligibility of an individual admitted to an IMD or who is a resident of an IMD as follows:

1) If disability has not been established, the ET shall initiate a referral to Disability and Adult Programs Division (DAPD) for a disability determination. They are to place the individual in Aid Code 53 until a disability determination has been completed. (See MPG Article 5, Section 4 for instructions on DAPD referrals.)

2) If disability is approved, place the individual in a disability aid code.

C. Individual 22 Years of Age in an IMD

On their 21st birthday, if a Medi-Cal recipient in an IMD has been receiving psychiatric inpatient hospital services and will continue to receive these services until age 22, he/she remains entitled to receive Medi-Cal benefits, if otherwise eligible, until age 22.

Aid code 82 (medically indigent child) shall be used for these individuals. At age 21, a Medi-Cal Eligibility Data System (MEDS) alert will be generated indicating that a special Eligibility Status Action Code (ESAC) is required for this aid code and age. ETs are to submit an on-line request to the Family Resource Center MEDs clerk to reactivate the individual on MEDS using aid code 82 and assigning a special ESAC code of "4" or "9".

At age 22 the above individual can no longer receive Medi-Cal based on receiving continuing psychiatric services, and their Medi-Cal eligibility must be reevaluated. If determined eligible, they are to be activated in the appropriate aid code.